## **Futures Sub-Committee Community Recovery Residences**

June 7, 2006

**Present:** Scott Thompson, Judy Rosenstreich, Michael Hartman, Paul Landerl

## **DMH/Futures Update**

Judy offered the following:

- June 20 is Joint Oversight committee meeting. CON process and Act Study
- Actuarial Study 3 Scenarios are for 41/53/65 beds. Now DMH begins the process of a clinical review process to give feedback on the Study. The first opportunity is the System of care meeting at Chapel Conf. Room 9-11, on 6/9. The next is the special Futures meeting on June 12 in Room 2-B, from 9-12 at 108 Cherry St.
- On June 16 DMH is meeting with City of Burlington to discuss the update on the CON process.
- Crisis Bed group is actively visiting other sites and determining what kind of programs exist and what aspects of them can be used to model for this effort.
- VSH Employee group is preparing a report for the Futures committee for August
  This would address the plan for how to address transition issues for VSH staff as the new facility is established.

## **CRR Update**

- Property at Williamstown location needed a new septic permit which should be completed shortly.
- VSP The Middlesex VSP Barracks Commander, John Imburgio, has been consulted about the project and offered some clarification re: their coverage, but overall felt the plan was appropriate.
- Process of COA for Williamstown has begun. The letter of intent is in and there is up to a 20 day turnaround. Following acknowledgement from VDH re: the letter the COA application will be sent. The latter has then a 60 day turnaround.
- WCMHS team which has been interviewing staff and patients at Brooks Unit believe there are a number of possible referrals for Williamstown. At different points in time it has been as low as 7 and as high as 10. However, due to constantly changing conditions on the Unit it is not relevant to talk who might actually transfer until within 30 days or so of the opening of the program.
- Rewrite of the Quad IV criteria This was done to clarify the question of voluntary and involuntary referrals. The Futures group endorsed the changes, but ongoing discussions in that group regarding this issue will continue. Larry Lewack of NAMI has proposed a enhanced structural matrix that the group is working on.

- Policy Development Sample policies are being assembled and will be put into a format for review in the next month or so. These are being drawn from existing programs as a starting point.
- VSH/Brooks Rehabilitation Unit plan A plan is needed that will ensure those taken out of Brooks to Williamstown will have bed at VSH if return is needed, but that all new referrals to BRU will be also reviewed with CRR. This process should be developed to try and limit the use of beds that are emptied by Williamstown transfer.
- Paul brought up the issue of what long term placement will be available to persons coming out of CRR. This will be a process to be developed by the Williamstown care team, similar to the efforts of VSH Social Work teams. Some models for this will be presented at the next meeting.
- The issue of staff hiring and training WCMHS has had at least 10 unsolicited inquiries about work at this site. It is clear that hiring will be a challenge, but it appears there is specific interest in working on this project.
- Location for the second CRR There was only a brief discussion on this point, but preference continues that it should be in another part of the state—outside the Barre-Montpelier-Randolph area due to staffing issues. As well the site as directed by the Futures Committee should be in a village/town location. However, it is clear that obstacles regarding stigma and apparent community safety will be challenges.
- Other second project issues, Given attention to this project there has been no action on the locating of a 2<sup>nd</sup> home. Committee thoughts on location and size. Technically it should be a 6 to 9 bed facility as we now have 11-14. One point of the 11 v 14 should we endorse that 11 beds in Williamstown enough for now, then have another 8-10 bed facility licensed that would then create some extra bed capacity. For instance if we opened another 14 licensed beds, but only used 10 or 11 we would have the 20 beds needed, but also be able to expand the overall capacity to up to 28 if needed.

The next meeting will be on August 23<sup>rd</sup> 9-11 at WCMHS Moody Court offices.